FORM 1	STATEM	ENT OF	2008				
Please print or type your name, mailing address, agency name, and position below:	FINANCIAL	INTERESTS	1				
LAST NAME FIRST NAME MIDDLE NA	ME: BY ANNOY	FOR OF USE ON					
MAILING ADDRESS: 25460 541114	cll Phul.	•		· ·			
Buita 50	Vings		ID Code				
NAME OF AGENCY:	P:	e C	D 16.	09JUN19PM0244SDE			
NAME OF AGENCY.  NAME OF OFFICE OR POSITION HELD OF	SOUGHT CHESC	riotia	Conf. Code	30#461			
	Vice Chair	2	P. Req. Code				
You are not limited to the space on the lines on CHECK ONLY IF CANDIDATE OR	NEW EMPLOYEE OR AF			Elæ(			
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):  DECEMBER 31, 2008  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  MANNER OF CALCULATING REPORTABLE INTERESTS: THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCOM NAME OF SOURCE OF INCOME	E [Major sources of income to the SOUF ADDF	RCE'S	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
Home Seport	1194/Sonit a Bah Rd.		•	12.0			
	SINITAGE	16.FL.					
		34/35		··········			
	ME OF MAJOR SOURCES	ADDRESS	•	the reporting person]			
BUSINESS ENTITY	OF BUSINESS' INCOME	OF SOURCE	ACTI	VITY OF SOURCE			
				-			
PART C REAL PROPERTY [Land, buildings owned by the reporting person]			FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.				
Shuita SPAS	INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.						
			OTHER FORMS	S you may need to on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]  TYPE OF INTANGIBLE   BUSINESS ENTITY TO WHICH THE PROPERTY RELATES							
NA							
		-					
· · · · · · · · · · · · · · · · · · ·							
					******		
PART E — LIABILITIES [Major debts] NAME OF CREDITOR		ADDRESS OF CREDITOR					
NA							
		<u></u>	· ·				
(1)							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]							
	BUSINESS ENTITY # 1	1	BUSINESS ENTITY #	2 .	BUSINESS ENTITY # 3		
NAME OF BUSINESS ENTITY	NA				,		
ADDRESS OF BUSINESS ENTITY					<u></u>		
PRINCIPAL BUSINESS ACTIVITY							
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST							
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
-		// \					

SIGNATURE (required):



DATE SIGNED (required):

6/15/19

## WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filling.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

#### NOTE:

# **MULTIPLE FILING UNNECESSARY:**

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

### WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

**Candidates** file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

## WHEN TO FILE:

Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

**Candidates** for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.